

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO.	FILING DATE						
						APPLICANT(S)		09/806615					
						CLAIMS							
AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	IND.	DEP.	IND.	DEP.	IND.	DEP.		
	IND.	DEP.	IND.	DEP.									
1						51							
2						52							
3						53							
4						54							
5						55							
6						56							
7						57							
8						58							
9						59							
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13						63							
14						64							
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41						91							
42						92							
43						93							
44						94							
45						95							
46						96							
47						97							
48						98							
49						99							
50						100							
TOTAL IND.	1	1	4	1	8	TOTAL IND.							
TOTAL DEP.	1	1	4	1	8	TOTAL DEP.							
TOTAL CLAIMS	1	1	28	1	72	TOTAL CLAIMS							
FO-1289 (2/78)						MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS						U.S. DEPARTMENT OF COMMERCE	